
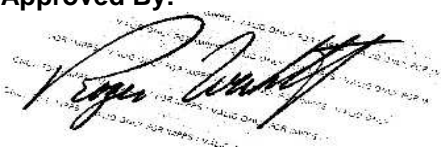



KANSAS DEPARTMENT OF CORRECTIONS

	INTERNAL MANAGEMENT POLICY AND PROCEDURE	SECTION NUMBER 11-106	PAGE NUMBER 1 of 10						
		SUBJECT: DECISION MAKING: Assessment, Classification Adjustment Counseling, and Case Management							
Approved By:  Secretary of Corrections		<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;">Original Date Issued:</td> <td style="width: 40%; text-align: right;">08-15-82</td> </tr> <tr> <td>Current Amendment Effective:</td> <td style="text-align: right;">10-21-08</td> </tr> <tr> <td>Replaces Amendment Issued:</td> <td style="text-align: right;">04-21-06</td> </tr> </table>		Original Date Issued:	08-15-82	Current Amendment Effective:	10-21-08	Replaces Amendment Issued:	04-21-06
Original Date Issued:	08-15-82								
Current Amendment Effective:	10-21-08								
Replaces Amendment Issued:	04-21-06								
Reissued By:  Policy & Procedure Coordinator		<p>The substantive content of this IMPP has been reissued as per the appropriate provisions of IMPP 01-101. The only modifications within the reissue of this document concern technical revisions of a non substantive nature.</p> <p>Date Reissued: 11-09-10</p>							

POLICY

Each facility shall maintain an ongoing planned and organized program of individualized adjustment counseling. Unless institutional populations and/or staff vacancies require otherwise, the casework model for inmates shall ensure a ratio of not less than one social service staff person per one hundred (100) inmates, nor less than one social service staff member per thirty (30) special needs inmates. (ACI 3-4384, 3-4385)

In the event that caseloads do exceed the above indicated levels, case management duties shall take priority over administrative duties. Unit team managers shall be relieved of administrative duties to assist corrections counselors who have excessive caseloads. If in the warden's judgment, a larger number of special needs or special management inmates per case worker is manageable, limits may be extended not to exceed a maximum of one hundred (100) inmates per case worker.

Counseling personnel shall provide guidance and assistance needed to ease the inmate's productive progress through the correctional system, and provide counseling both upon request and when required during any type of crisis. (ACO 2-CO-4F-01; ACI 3-4386)

Each inmate shall be assigned to a correction's counselor within seven (7) days after the inmate's admission to a facility. Inmates undergoing evaluation and assessment at TCF or EDCF RDU or who are assigned to a facility orientation unit, shall be the responsibility of the unit management team assigned to that unit.

Custody and programs assessments shall be completed on every inmate admitted to the custody of the Kansas Department of Corrections to determine the inmate's needs. (ACO 2-4A-01) Unless precluded for security or other substantial reasons, all inmates shall appear at their case reviews and are given, at a minimum, forty-eight (48) hours notice prior to the review. (ACI 3-4289)

Except for condition violators who have waived their final revocation hearing, within one month after each inmate's admission or re-admission evaluation, an initial classification committee shall meet with the offender to develop a program plan. The development of an inmate's program plan and timetable for projected completion shall be based on an interview of the inmate by the initial classification committee and on review of available information concerning the inmate, including any specific recommendations made by RDU regarding needed features in the program plan for that particular inmate. If an inmate is placed at a facility where the inmate's program needs can not be met, every effort shall be made to transfer the inmate to a facility where the recommended program[s] is [are] available. The initial classification committee shall also consider the inmate's personal preference for particular programs. The committee shall consider opinions of the security officers as they relate to the formulation of a plan.

All inmates shall be classified into the most appropriate custody and program level. (ACO 2-4B-01)

Custody classifications shall be conducted in accordance with the Department's written classification plan, per the provisions of this IMPP. (ACO 2-4B-01; ACI 3-4282) Every effort shall be made to ensure that the inmate is classified at the lowest custody level possible, consistent with operational and public safety.

For inmates under the age of nineteen (19), the inmate's age, physical appearance, and maturity level should be considered prior to recommending any proposed facility transfer/placement.

Discrimination based upon an inmate's race religion, national origin, gender, disability, or political views is prohibited in making administrative decisions, in making living unit assignments, and in providing access to programs.

All inmates shall be given the opportunity to participate in work and programs that will assist them during incarceration and upon release into the community; such work and/or program participation shall be in accordance with the inmate's assessed needs.

If an inmate refuses to fully participate in the RDU assessment and evaluation process, all good time credits shall be withheld and the inmate shall remain on intake Incentive Level until such time the evaluation is completed.

DEFINITIONS

Case Management: The supervision, control, and documentation of each inmate's progress through the correctional system.

Classification: A process for determining, through a case review, the programmatic needs and custody requirements for each inmate who has been sentenced to the custody of the Secretary of Corrections.

Custody Classification: A process to assess, through a case review, the level of danger an inmate poses to correctional security or to the community in the event of authorized or unauthorized access to the public. Custody classification is conducted through the use of objective criteria established in the Security Classification Manual and Assessment for Inter-Facility Transfer and Placement in Multi-occupancy Housing Form (Attachment A).

Facility Classification: The case review process in which each inmate's programmatic needs and custody requirements are studied and examined in retrospect to determine if any changes in status are necessary and to document progress toward the completion of program objectives.

Facility Classification Committee: An interdisciplinary group of employees designated to conduct the classification process at each correctional facility. Membership on the committee includes the classification administrator or designee, representatives from one or more of the facility's program providers and a representative from a unit team. (ACI 3-4284)

General population inmate: An inmate whose status behavior and mental or physical condition requires no special handling or treatment by staff.

Initial Classification: The case review process by which each inmate's programmatic needs and custody requirements are first determined upon the inmate's entry/re-entry into the custody of the Department of Corrections.

Initial Good Time Award: The first award of good time to the offender covering the period from the sentence begins date through the date of the initial classification (case review).

Inmate Program Plan (IPP): A document signed by the inmate and a designee of the Secretary of Corrections, which outlines those facility programs, which have been recommended be completed by the inmate while under the Department's supervision.

Multi-Occupancy Living Area: Facility inmate housing where more than one inmate is assigned to a room or cell, or where there is no physical structure (i.e., bars or doors) to prevent inmate movement or access between living quarters.

Post-Incarceration Supervision: The supervision of offenders for any type of release from a KDOC facility, to include parole, conditional release, and post-release supervision.

Program Classification: A process to assess, through a case review, the skills or other attributes contributing to law abiding behavior that the inmate lacks.

Program Management Committee: The committee, consisting of the warden or designee and an administrative/supervisory representative from the Programs and Security divisions of the facility responsible to review and approve or deny proposed classification exceptions, amendments to inmate program agreements, and transfer requests/recommendations. (ACI 3-4284)

Risk Assessment: A process to assess the potential level or degree of danger or security concerns presented for the inmate and/or facility(s) in transferring an inmate to another facility and/or placing the inmate in a multi-occupancy living area.

Special Management Inmate: An inmate whose status or behavior presents a serious threat to the safety and security of the facility, staff, general inmate population, or themselves. Special handling or housing is required to regulate their behavior.

Special Needs Inmate: An offender who: is mentally ill/mentally retarded or has a physical handicap, terminal illness, contagious disease or geriatric needs or who poses a high-risk or requires protective custody.

Treatment Staff: State employed or contractual positions identified as social workers, psychologists, counselors, or corrections counselors. (ACI 3-4384)

PROCEDURES

I. Inmate Assessment

- A. Except as provided in procedure I.B., each inmate received into the custody of the Secretary of Corrections shall be assessed with regard to his/her needs in the following areas:
 - 1. Academic Education
 - a. Literacy
 - b. GED
 - 2. Substance Abuse Treatment (SAT)/Therapeutic Community (TC);
 - 3. Sex Offender's Treatment Program (SOTP);
 - a. The identification of those offenders who are "sexually violent predators" as defined by KSA 59-29a02.
 - 4. Medical, Dental and Mental Health Services;
 - 5. Vocational Education;
 - 6. Special Services (ACO 2-4B-01; ACI 3-4292);
 - a. All testing shall be carefully assessed to determine if the inmate is in need of special programming. Special attention shall be given to cases presenting symptoms of:
 - (1) Mental retardation;

- (2) Severe emotional disturbance; and/or,
 - (3) Other physical or mental disabilities, which would indicate special programming and/or special education.
 - (a) Male inmates who meet the eligibility requirements for, and, whose assessment indicates they may be in need of special education services shall be transferred to LCF for further program assessment.
- 7. Pre-Release; and,
 - a. As provided by IMPP 10-136.
- 8. Work Release.
 - a. As provided by IMPP 15-101.
- B. Inmates re-incarcerated, as post incarceration supervision condition violators with no new sentence shall be reassessed to determine their mental health needs and any other needs as determined necessary by the inmate and staff.
- C. Each inmate assessment shall be documented in an evaluation report.

II. Initial Classification

- A. Each inmate admitted to the Department of Corrections shall undergo an initial classification.
 - 1. The initial classification shall include the establishment of the appropriate incentive level consistent with the provisions of the Privileges and Incentives Level System, in accordance with IMPP 11-101.
- B. The initial classification shall consist of two (2) phases.
 - 1. Except as indicated in section II.B.3., Phase I of initial classification shall be completed at the intake facility and include the following:
 - a. Review of the evaluation report and other pertinent documents;
 - b. Review of the sentencing computation and establishment of a release date;
 - c. Interview of the inmate;
 - d. Completion of the custody classification record;
 - (1) Including a check for wants and warrants per IMPP 05-108.
 - e. Establishment of the inmate's program plan (IPP) in accordance with IMPP 11-107;
 - (1) All IPPs shall be signed and dated by the inmate and designated staff.
 - (2) IPPs shall be completed upon completion of the RDU evaluation, but prior to the inmate's transfer.

- f. Establishment of central monitoring of the case, as needed, in accordance with IMPP 12-125;
 - g. Completion of the risk assessment, using the Inter-Facility Transfer and Placement Form (Attachment A, Form #11-106-001); (MALES ONLY);
 - h. Establishment of Sexual Motivation Indicator (SMI)
 - i. Completion of an LSI-R pursuant to IMPP 11-113; and,
 - j. Determination of the appropriate post-intake housing facility, using the following criteria:
 - (1) The availability of bed space;
 - (2) Any security needs/considerations with regard to the inmate and/or facility;
 - (3) The inmate's program needs; and,
 - (4) Any medical/special service needs of the inmate. (ACO 2-4B-01; ACI 3-4292)
2. Except as indicated in sections II.B.3. and II.B.4., Phase II of initial classification shall be completed by the facility classification committee within ten (10) working days of the inmate's placement at the assigned housing facility/unit, immediately following intake, and, shall include the following:
- a. Review elements of Phase I of the initial classification, as applicable, for accuracy and completeness and to correct any errors, delinquencies and omissions;
 - b. Determine the specific program and/or type of work detail assignment in which the inmate shall be placed;
 - (1) Identify "Limited" and "General" worker and enter in OMIS for all minimum custody inmates.
 - c. Determination of the initial good time award, if any, in accordance with applicable KARs and consistent with the inmate's monthly anniversary date; and,
 - d. Establish a case review cycle coinciding with the custody classification review schedule.
 - (1) Inmates whose projected release date is 5 years and 4 months or greater shall be on an annual review cycle.
 - (2) All other inmates serving an active Kansas sentence shall be placed on a 120 day review cycle.
 - (3) Inmates on an annual review cycle shall be changed to one of 120 days whenever their projected release date becomes less than 5 years and 4 months.
 - e. Indicate whether or not the inmate is to be managed as a sex offender pursuant to IMPP 11-115.
3. For offenders admitted as post release supervision condition violators with no new sentences, an Initial Program Classification need not be completed.

- a. In the case of those inmates admitted as post release supervision condition violators for whom Phase II of the Initial Program Classification is not required.
- b. The assigned counselor shall be responsible for:
 - (1) Completing Part A of the Violator Classification Checklist (New Attachment E);
 - (2) Assisting the inmate in the development of strategies for addressing those risk behaviours that resulted in revocation; and,
 - (3) Corresponding with the offender's prior Parole Officer as needed to resolve any issues related to the offender's re-release.
4. For offenders admitted as probation violators who have less than four months remaining to serve to their projected release, and who have no post release supervision period to serve, an Initial Program Classification need not be completed.
 - a. In the case of those inmates for whom Phase II of the Initial Program Classification is not required, the assigned counselor shall be responsible for completing Part B of the Violator Classification Checklist (Attachment E)."

III. Inmate Case Reviews: Scheduling and Notification

- A. The unit team shall be responsible to conduct case reviews for each inmate at routine intervals in accordance with the schedule established within the provisions of this IMPP. (ACO 2-4B-01, 2-4B-03; ACI 3-4283, 3-4287)
 1. The unit team shall be responsible for reviewing and/or making any change in the inmate's incentive level consistent with the provisions of the Privileges and Incentives Level System in accordance with IMPP 11-101.
- B. The case review shall consist of:
 1. Completion of the inmate's Custody Classification Record in accordance with the Custody Classification Manual;
 2. Completion of the automated inmate Program Classification (Attachment B, Form#11-106-002); (ACI 3-4288)
 3. Recommendations for a change in the inmate's status or transfer, as appropriate;
 4. Determination of any change(s) in the inmate's risk assessment (Attachment A);
 5. Determination of good time awards, as applicable;
 - a. Inmates on an annual review cycle shall have good time assessed on a 120 day cycle and the three component cycles applied at the time of the scheduled annual review.
 6. All updates to telephone list, emergency notification, disposition of deceased body form and visiting list shall be accomplished in conjunction with the inmate's review cycle;
 - a. Out of cycle requests shall be evaluated on a case by case basis.
 7. Determine if any changes in central monitoring are necessary;

8. Insure that program status data in OMIS is accurate and complete; and,
 9. Review work and living quarters reports.
 10. Ensure that detainer information is current.
- C. Inmates shall be present and permitted to participate in all case reviews unless precluded for security reasons or other substantial reasons, such as placement on interstate compact. (ACI 3-4284, 3-4289)
- D. Under most circumstances, case reviews shall be conducted on the established cycle. Unscheduled case reviews may be requested by staff or the inmate and approved by the unit team manager where circumstances dictate. (ACI 3-4290)
1. In evaluating such request, the following shall be considered by the unit team manager:
 - a. The urgency of the situation;
 - b. Any changes in the inmate's legal status; and,
 - c. The amount of time until the inmate's next scheduled review.
 2. Inmate requests for an unscheduled case review shall be submitted in writing to the unit team manager by way of a Form 9.
- E. Inmates shall be given a minimum of forty-eight (48) hours written advance notice of any case review. This notification may be waived by the inmate at the inmate's written request. (ACI 3-4289)
- F. The unit team manager shall ensure that:
1. The inmate's Parole Eligibility Report (PER) and/or release preparation casework is completed in accordance with IMPP 11-117; and,
 2. Each inmate case within the manager's area of responsibility is reviewed as scheduled. If a delinquent case is assigned, the unit team manager shall ensure that the delinquency is corrected.
- G. All inmate case reviews shall be forwarded by the unit team manager to the facility classification administrator for review and approval. (ACI 3-4284)
1. All inmate case reviews shall be reviewed and signed by the unit team manager prior to forwarding.
 - a. If the case review is incomplete or contains inaccurate information, it shall be returned to the inmate's counselor for revision.
 2. Inmate case reviews involving the following actions shall be forwarded by facility classification administrator to the Program Management Committee (PMC) for further review and approval: (ACI 3-4284)
 - a. Recommendations for custody classification exceptions;
 - b. Amendments to inmate program plans (IPP);
 - (1) Amendments shall be requested on the Program Classification Review (Attachment B).

- c. Facility transfer requests, including requests for interstate compact transfers per IMPP 11-104; and,
 - d. Furlough request.
- H. The program classification review shall be the primary document for recording the inmate's programmatic progress and for recommending any status changes.
 - 1. In recommending an inmate for a programmatic transfer the criteria established in IMPP 11-103 shall be considered.
 - a. For inmates under the age of nineteen (19), each inmate's age, physical appearance, and maturity level shall be considered prior to recommending any facility transfer/placement.
 - 2. Inmate initiated requests for transfers shall be reviewed and considered in accordance with IMPP 11-103.

IV. Additional Caseload/Case Management Functions

- A. Each inmate shall be assigned a corrections counselor within seven (7) days after the inmate's admission to a facility.
- B. Each counselor shall perform a range of activities to include the following;
 - 1. Provide guidance to each inmate and keep them informed of significant changes and decisions.
 - 2. Respond to requests for counseling with regards to adjustment problems, crises and family contacts. (ACI 3-4386)
 - 3. Make necessary referrals to other facility services (medical, mental health, etc.)
 - 4. Initiate modifications to the inmate's environment.
 - a. Such modifications include but are not limited to housing, work, and other program changes.
 - 5. Encourage the inmate to actively participate in programs and recreational activities as deemed necessary and appropriate.
 - a. Such activities include, but are not limited to, self-help programs, leisure time pursuits, and remedial/training opportunities.
 - 6. Maintain and document personal contact with inmates at least once every thirty (30) days;
 - 7. Establish regularly occurring, structured contacts as follows:
 - a. Review of initial custody classification and program classification;
 - a. Review of custody classification;
 - c. Review of scheduled and unscheduled program classifications;
 - d. Sessions relating to significant decisions affecting the inmate;
 - e. Sessions initiated by the inmate;
 - f. Sessions based on referrals from facility staff;

- g. Sessions related to pre-parole and parole planning; and,
 - h. Any other contact necessary or appropriate to carry out case management duties pursuant to this IMPP.
- C. Significant contacts by the corrections' counselor with each inmate shall be documented in TOADS.
 - 1. Documentation should be sufficiently detailed to explain the nature of the contact and response/reaction from the inmate.
- D. Assist each inmate with the preparation of an effective release plan.
 - 1. Each plan shall identify areas of risks and needs from the LSI-R.
- E. Assist each inmate in securing a driver's license, review eligibility for veteran's services and benefits, and complete application for disability benefits, as needed pursuant to IMPP 11-121.

V. Appeal of Classification Decisions (ACO 2-4B-03; ACI 3-4288)

- A. Within 72 hours after receiving a classification decision, the inmate may appeal the decision to the warden. The inmate's request shall be submitted through the unit team as a form 9 request for review.
- B. If the warden did not participate in the classification decision, the warden shall review the decision and the inmate's written appeal. The warden shall return a written response to the inmate's appeal within fifteen (15) working days of the warden's receipt of the appeal.
- C. If the warden was a participant in the classification decision, the inmate's appeal shall be forwarded to the Deputy Secretary of Facility Management's designee for review. The reviewer shall return a written response to the appeal within fifteen (15) working days of the receipt of the appeal.
- D. The decision of the warden or Deputy Secretary of Facility Management's designee shall be final.

VI. For Inmates Convicted of Crimes Committed Prior to July 1, 1993: Case Review Process After Parole Hearings

- A. Upon the receipt of an inmate's parole hearing results, the institutional parole officer shall take the following actions:
 - 1. Notify the classification administrator and the inmate's unit team of the decision of the Parole Board within two (2) working days;
 - 2. Notify and coordinate efforts with the appropriate parole office, treatment center, and/or community placement facility of all relevant decisions to ensure arrangements are in order for the inmate's release;
 - 3. Develop, coordinate and maintain the caseload summary on all inmates on "paroled" and "continued" status. (ACO 2-4B-01)
 - a. The Institutional Parole Officer Caseload Summary (Attachment C, Form #11-106-003) shall be prepared.
 - b. The caseload summary shall be completed by the third working day of each month.

- B. The inmate's unit team shall ensure that a Kansas Parole Board Action Notice (Attachment D, Form #11-106-004), reflecting the KPB decision, is prepared and presented to the inmate.
- C. The inmate's unit team manager shall ensure that the inmate, if on "paroled" or "continued" status, is provided an opportunity to satisfy any KPB conditions for parole.
 - 1. Entrance and exit dates into programs, or, the opportunity for the inmate to enter recommended programs, shall be documented.
 - 2. The institutional parole officer shall be notified of any change in the inmate's status.
- D. Upon completion, refusal, or dismissal of an inmate from a program(s), the institutional parole officer shall notify the Kansas Parole Board of the inmate's status by a memo with supporting data and/or an explanation of the inmate's status no later than three (3) working days after the inmate's completion, refusal or dismissal.
- E. The caseload summary shall be forwarded to the Deputy Secretary of Facility Management or designee, who shall have the responsibility of reviewing all facility caseload summaries.

NOTE: The policy and procedures set forth herein are intended to establish directives and guidelines for staff and offenders and those entities who are contractually bound to adhere to them. They are not intended to establish State created liberty interests for employees or offenders, or an independent duty owed by the Department of Corrections to either employees, offenders, or third parties. Similarly, those references to the standards of various accrediting entities as may be contained within this document are included solely to manifest the commonality of purpose and direction as shared by the content of the document and the content of the referenced standards. Any such references within this document neither imply accredited status by a Departmental facility or organizational unit, nor indicate compliance with the standards so cited. The policy and procedures contained within this document are considered to be compliant with all applicable Federal statutes and/or regulatory requirements. This policy and procedure is not intended to establish or create new constitutional rights or to enlarge or expand upon existing constitutional rights or duties.

REPORTS REQUIRED

Name/Type of Report	By Whom/To Whom	Due
Caseload Summary	Institutional Parole Officer to Corrections Manager - Classification	Monthly

REFERENCES

KSA 59-29a02, 75-5248
IMPP 10-104, 10-116, 10-117, 10-136, 11-101, 11-103, 11-104, 11-107, 11-117, 12-125, 15-101
ACO 2-4A-01, 2-4B-01, 2-4B-03, 2-4F-01
ACI 3-4282, 3-4283, 3-4284, 3-4287, 3-4288, 3-4289, 3-4290, 3-4292, 3-4384, 3-4385, 3-4386,

ATTACHMENTS

Attachment A - Screening for Transfer and Placement in Multi-Occupancy Housing, 2 pages
Attachment B - Program Classification, 2 pages
Attachment C - Institutional Parole Officer Caseload Summary, 2 pages
Attachment D - Kansas Parole Board Action Notice, 1 page
Attachment E - Violator Classification Checklist , 1page

**KANSAS DEPARTMENT OF CORRECTIONS
SCREENING FOR TRANSFER
AND PLACEMENT IN MULTI-OCCUPANCY HOUSING**

Part I and Part II of the Assessment for Inter-Facility Transfer and Placement in Multi-Occupancy Housing form is to be completed on all inmates by the sending facility prior to transfer. Part II of the form is to be completed prior to the initial placement of an inmate from a single to a multi-occupancy cell, room or dormitory living area.

Those facilities which temporarily house orientation inmates in multi-occupancy cells may continue to do so provided the sending facility has not indicated on the Assessment for Transfer and Placement in Multi-Occupancy Housing form that the inmate poses a risk.

Eventually the Assessment for Transfer and Placement in Multi-Occupancy Housing form will become a part of the computerized management information system. Until such time, the completed form is to be filed in the Unit Team file as follows:

When used as a screening instrument for **inter-facility** transfers, the completed copy shall be placed in the Unit Team File (right side) by the sending facility. The assessment can then be reviewed by the receiving facility upon the inmate's arrival.

When used as screening instrument for **intra-facility** placements involving the initial placement of inmates in a multi-occupancy living area, the completed form shall be placed in the Unit Team File. The most recent copy of the assessment (Part II) shall be retained as verification that the inmate was screened prior to placement in a multi-occupancy cell, room or dormitory living area. Once Part II of the assessment has been completed and an inmate is placed in multi-occupancy living area, the inmate may be moved from one multi-occupancy living area to another within the same facility without having to complete another assessment.

The following items are decision characteristics to be utilized by the Unit Team when reviewing the proposed transfer of an inmate to another facility or from a single to multi-occupancy living area with the existing facility.

Inter-facility Transfers (Complete Parts I and II)

A response to items 1-16 is to be made in reviewing the proposed inter-facility transfer of an inmate. A response of NO on any item (1-16) requires the sending facility's Classification Administrator or designee to contact the proposed receiving facility's Classification Administrator or designee and provide an explanation in the space provided at the bottom of this form.

Intra-facility Transfers (Complete Part II only)

A response to items 11-16 is to be made in reviewing the proposed transfer of an inmate from a single occupancy to multi-occupancy living area within the same facility. A response of NO to any item (11-16) should preclude the placement of the inmate in a multi-occupancy setting. Remoteness in time, however, may override a NO response. An explanation of an override shall be provided on the space at the bottom of this form.

**ASSESSMENT FOR TRANSFER AND PLACEMENT
IN MULTI-OCCUPANCY HOUSING**

Name _____ KDOC# _____

Incentive Level _____ Date of Next Review ____/____/____

Transfer Date _____ Sending Facility _____ Receiving Facility _____

Current Medical Class* _____ Current MH Level _____

Part I

- | No | Yes | |
|-----|-----|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ___ | ___ | 1. Is the custody classification current and correct? |
| ___ | ___ | 2. Have all pending class I and II disciplinary reports been resolved , or has the receiving facility been advised that there are pending disciplinary reports? |
| ___ | ___ | 3. Is the inmate more than ninety (90) days from seeing the Kansas Parole Board and/or a mandatory release date? |
| ___ | ___ | 4. Has the clinic verified that the inmate has no pending medical appointments or referrals? |
| ___ | ___ | 5. Is the MH level compatible with the receiving facility? |
| ___ | ___ | 6. Will the inmate's transfer to the proposed facility be free of community political criticism due to the nature of the crime? |
| ___ | ___ | 7. Considering any escape history of this inmate, is the proposed transfer reasonable? |
| ___ | ___ | 8. Has any conflict resulting from the inmate being on Continued Status been addressed (if applicable). |
| ___ | ___ | 9. Was the inmate's response to any KPB decision within ninety (90) days appropriate/responsible (minimum custody only)? |
| ___ | ___ | 10. Has a review been conducted to ensure that the inmate is not currently participating in a required program? (If removed from a program, indicate program and reason for removal in "comments".) |
| ___ | ___ | 11. Is the inmate's LSI-R current as per IMPP 11-113? |

Part II

- | | | |
|-----|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| ___ | ___ | 12. Has any known conflict resulting in the inmate being a Central Monitoring (CM) case been resolved? |
| ___ | ___ | 13. Is the inmate free from any repeated history of being victimized in terms of sexual favors or other aggressive actions by other inmates? |
| ___ | ___ | 14. Is the inmate free from any history of repeated assaultive or threatening behavior towards other inmates or staff? |
| ___ | ___ | 15. Is the inmate free from having been professionally diagnosed as psychotic, homicidal, sadistic, suicidal, or paranoid during the past (5) years? |
| ___ | ___ | 16. If under the age of 19, has the inmate's age, physical appearance, maturity level, etc., been considered prior to recommending the proposed facility transfer/placement? |
| ___ | ___ | 17. If the transfer is to a minimum security living unit/facility, warrants and wants check has been conducted in accordance with IMPP 05-108. |

*List medical restrictions: _____

Indicate the criteria and specifics for any **no** answer: _____

Other comments: _____

Signature of Staff member Conducting
The Risk Assessment Transfer

Date

**INSTRUCTIONS/GUIDELINES
FOR COMPLETION OF THE AUTOMATED
PROGRAM CLASSIFICATION FORM**

Access the appropriate OMIS Menu and Option Number

Screen #1 of 4

Enter Inmate KDOC #
Enter the first three letters of the inmate's last name
Enter the review date (up to one month in the past/up to 3 days in the future)
Enter the type of review
R- Regular Scheduled Review
U – Unscheduled Review (also use for special)
I – Initial Review

To print a copy of the review after the data entry is completed, type "Y" in the "Print" space. Otherwise, leave blank.

Screen #2 of 4

Except for Regularly Scheduled Reviews, enter the next review month and year. The computer will generate this information for Regularly Scheduled Reviews.
Except for Regularly Scheduled Reviews, enter the period covered by the review. (mo year to mo year) The computer will generate this information for Regularly Scheduled Reviews.
Enter the release date and type
GR – Guidelines
PE – Parole
CR – Conditional
MX – Maximum Sentence Expiration (indeterminate)
SD – Sentence Discharge (determinate)

The release type must be compatible with the guidelines indicator code.

Select the offenses that are to be included in the review. Press F5 to review the offender's active offenses. Only list each type of offense once. Indicate the number of convictions by placing the appropriate number (1-99) in front of the appropriate offense. (ie: If the offender has two counts of Theft on one case, enter 2 in front of 21-3701Theft. The computer will print "2 x Theft". If there are two cases involving one count each, do the same.

Program Status

The computer will generate the inmate's RDU assessed program needs and initial recommendations and the inmates program participation status to date.

If an IPP is amended, enter an "A" or a "D" for a program Amendment or Deletion respectively.

Enter a description for any subsequent programs/services and then,

Press "Enter" to continue.

Screen #3 of 4

Quarters Report and Work Report– select from the following:

S for Satisfactory
E for Exceptional
U for Unsatisfactory

Type of Worker- General or Limited for minimum custody inmates. Otherwise, N/A

Current Health, MH Level, Current MH Treatment and Housing Considerations will be generated by OMIS.

Sex offender status:

The computer will generate the inmate's Sexually Motivated Indicator (SMI) Code and restrictions placed on the inmate relative to visitation.

The inmate's Incentive Level will be generated by OMIS.

Good Time Awards – select from the following:

Enter the # of days of good time on the indeterminate sentence in the "I" blank.
Enter the number of days of good time on the determinate sentence in the "D" blank.
If the inmate is not eligible to earn good time, type and "X" in the "N/A" blank.

Detainers:

If the inmate has a detainer, the computer will generate an "X". Press F6 to view the inmate's detainers. Type and "X" in front of those that you want to include in the review.

Data review items:

For each of the following, enter a "C" for current or a "U" for updated:

Phone list
Visitation list
ID Current
Central Monitoring
Emergency Data
Deceased Body Form

Disciplinary Information:

All closed disciplinary cases with a verdict of guilty within the last six months will be computer generated. To include all listed disciplinarians, type and "X" in the Select All DRs Blank. To select individual DRs, type an "X" in the blank preceding the DR to be included.

Screen #4 of 4

Enter comments in the space provided. Additional comment lines may be generated by pressing the "page down" key while the cursor is in the comments section of the review form.

The PMC members will sign the original copy of the Program Review. Once complete, the signed copy of the review will be forwarded to the classification administrator's office. The classification administrator or designee will enter all committee members' names and date of approval/disapproval. If the review is disapproved, explanatory comments will be entered. For additional committee member lines, press the "page down" key while the cursor is in the committee section of the screen.

The committee name will print below the signature line on the report. To print the member's title in lieu of the name, enter the committee member's title in the "Member's Name" blank.

NOTE: This approval/disapproval information is NOT the final approval for the review. Staff designated by the facility classification administrator will have authority to certify the completion of the review so that it can appear in OMIS.

KANSAS DEPARTMENT OF CORRECTIONS
INSTITUTIONAL PAROLE OFFICER
CASELOAD SUMMARY

General Instructions for Processing and Use

The Institutional Parole Officer Caseload Summary form is used to document all continued and paroled cases unable to be released from the facility. The form is also used to document an inmate's refusal to enter into a program agreement. In preparing the report, all items shall be completed for each inmate, and none shall be left blank.

Upon completion of the caseload summary, a copy shall be provided to the Central Office Program Management Division, Classification Administrator, Deputy Warden of Programs and facility Unit Team.

Each facility IPO shall have completed a caseload summary by the first Monday of each month.

In the following segment of these directions, the IPO caseload summary is discussed by items. Refer to the number caseload summary in the attachment to locate these items on the form.

Caseload Summary Identification Section

- | | | |
|--------|------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Item 1 | Name: | Inmate last and first name, middle initial |
| Item 2 | Number: | Inmate number |
| Item 3 | Most Recent KPB Decision and Date: | List KPB decision continued or parole and date of KPB hearing. |
| Item 4 | Conditions of Decision: | List the wording of the KPB decision. |
| Item 5 | Living Unit | Cell house or dormitory. |
| Item 6 | Current Chronological Status: | List specifically the inmate's current status. Use dates, names of programs and reasons to justify status. Each IPO is to list each action taken to report case tracking. |

DATE: _____

PAGE NUMBER: _____

**KANSAS DEPARTMENT OF CORRECTIONS
INSTITUTIONAL PAROLE OFFICER/NAME
CASELOAD SUMMARY**

FACILITY NAME - PAROLE OR CONTINUED

Name	Number	Most Recent KPB Decision and Date	Conditions of Decision	Living Unit	Current Chronological Status
(1)	(2)	(3)	(4)	(5)	(6)

KANSAS DEPARTMENT OF CORRECTIONS
KANSAS PAROLE BOARD
ACTION NOTICE

Date: _____

To: _____ No: _____

=====

Date
Heard: _____

KANSAS PAROLE BOARD, has taken the following action in your case:

_____ Inmate Signature	_____ Date	_____ Director of Classification
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=====

IF YOU HAVE BEEN GRANTED PAROLE. Your release will take place on or after the effective date set by the PAROLE BOARD, and only after your parole plan has been investigated and approved. The parole order is conditioned upon your maintaining a satisfactory institution record until released.

IF YOU ARE PASSED TO A LATER DATE. The PAROLE BOARD will consider your case further during the month designated. A good institutional record and a sound parole plan are essential requirements for release on parole.

=====

Distribution: White - Inmate Canary - Central File Pink - KPB Goldenrod - Unit Team

Violator Classification Checklist

Inmate Name: _____ Inmate Number: _____

Part A: Post Release Violators who have waived their Final Hearing

- _____ 1. The RW Movement has been entered in OMIS or the inmate has been scheduled for a revocation hearing with the Kansas Parole Board.
 - _____ 2. The Sentence record Summary has been reviewed, and new release dates are accurate.
 - _____ 3. The revocation report, transport memorandum and closing summary have been reviewed.
 - _____ 4. The evaluation report and other pertinent documents have been reviewed.
 - _____ 5. A custody classification record has been created.
 - _____ 6. A system review of the inmate's status as it relates to central monitoring has been completed.
 - _____ 7. As applicable the inmate's LSI-R Record has been reviewed.
 - _____ 8. A Condition Violator Good Time Record has been created.
 - _____ 9. A check for warrants and wants has been conducted.
 - _____ 10. The inmate's Incentive Level has been reviewed and is accurate.
 - _____ 11. The inmate has been referred to Medical and/or MH staff as needed.
 - _____ 12. A re-release plan is in place that addresses issues resulting in the inmate's prior revocation(s).
 - _____ 13. If the sex offender indicator is "yes", the field "is the victim the inmate's child" is completed.
As necessary a sex offender override has been considered.
 - _____ 14. If the inmate is not minimum custody, an exception is being submitted.
- ____ Yes ____ No

Part B: Probation Violators with No Post Release Supervision

- _____ 1. Phase I of the Initial Classification process (completed at RDU) has been reviewed.
- _____ 2. The inmate has been assigned to a work detail with a secondary assignment as a "limited or "general" worker.
- _____ 3. An initial good time award has been completed in accordance with applicable regulations and department policies.
- _____ 4. The inmate has been advised of his or her projected release date.
- _____ 5. The inmate has been advised to submit a release plan that includes a residence and transportation arrangements if available.
- _____ 6. All Central Monitoring issues have been reviewed.
- _____ 7. If assigned to minimum custody, a check for wants and warrants has been completed in accordance with IMPP 05-108.
- _____ 8. The Inmate's Sexually Motivated Indicator (SOI) - is entered.
- _____ 9. If the inmate's SOI is yes, the field "is the victim the inmate's child" is completed.
- _____ 10. If based upon the application of the point-based custody items, the inmate is assigned to a custody level other than minimum custody, the inmate's status has been reviewed and consideration given to submitting a classification exception.

Date Completed: _____ Staff Member: _____